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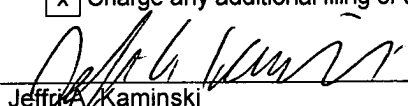
FEE TRANSMITTAL For FY 2005		Complete if Known		
		Application Number	09/883,986-Conf. #5656	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	June 20, 2001	
		First Named Inventor	Masanori Umeda	
		Examiner Name	R. S. Al Aubaidi	
TOTAL AMOUNT OF PAYMENT		Art Unit	2642	
(\$)		450.00	Attorney Docket No.	32011-173213

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 22-0261
	Deposit Account Name: Venable LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						<u>Small Entity</u>	
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
- 40 =		x	=		Fee (\$)	Fee Paid (\$)	
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
1 - 4 =		x	=				
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
- 100 =		/50	(round up to a whole number) x		=		
4. OTHER FEE(S)							
Other (e.g., late filing surcharge): 1252 Extension for response within second month						450.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	42,709
Name (Print/Type)	Jeffri A. Kaminski	Telephone	(202) 344-4000
		Date	February 14, 2006



AMENDMENT TRANSMITTAL LETTER			Docket No. 32011-173213	
Application No. 09/883,986-Conf. #5656		Filing Date June 20, 2001	Examiner R. S. Al Aubaidi	Art Unit 2642
Applicant(s): Masanori Umeda				
Invention: CALL CONNECTION MANAGEMENT EQUIPMENT FOR WIRELESS MOBILE COMMUNICATION NETWORK				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	14	- 20 =		x
Independent Claims	1	- 1 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify): Extension for response within second month				450.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				450.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity				
<input type="checkbox"/> No additional fee is required for this amendment.				
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>22-0261</u> in the amount of \$ <u>450.00</u> . A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>22-0261</u> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 Jeffrey A. Kaminski Attorney Reg. No.: 42,709			Dated: <u>February 14, 2006</u>	
VENABLE LLP P.O. Box 34385 Washington, DC 20043-9998 (202) 344-4000				